

**FINANCIAL DISCLOSURE STATEMENT**State Form 40876 (R11 / 3-10)
OFFICE OF THE INSPECTOR GENERAL
IC 4-2-6-8**RECEIVED**

JAN 31 2011

For the calendar year

2010

OFFICE OF THE INSPECTOR GENERAL



Check if this is an amendment to your current statement.

Please read guidelines on page 4.

Name (last) Daniels, Jr.	Name (first) Mitchell	Name (middle) E.
Spouse's name (last) Daniels	Name (first) Cheri	Name (middle)
Office address (number and street) Statehouse, Room 206	City Indianapolis	ZIP code IN
Office telephone number (317) 232-4567	Email address (required) mdaniels@gov.in.gov	

I am filing this statement as a: (please select one) <input type="checkbox"/> Candidate for office <input checked="" type="checkbox"/> Incumbent officeholder <input type="checkbox"/> State employee	
Office or agency Governor	Job title Governor

EACH PART MUST BE ANSWERED. WORDS IN *BOLD ITALICS* ARE INCLUDED IN THE DEFINITIONS.

If you have information to report below, select YES. If no information, select NO. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
PART 1 - GIFTS		
List the name and address of any person known to have a business relationship with the agency of the state officer or employee or the office sought by the candidate, and from whom the state officer, candidate, or the employee, or that individual's spouse or unemancipated children received a gift or gifts having a total fair market value in excess of one hundred dollars (\$100).		
Name (last)	Address (city)	ZIP code
Name (last)	Address (city)	ZIP code
Name (last)	Address (city)	ZIP code

If you have information to report below, select YES. If no information, select NO. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
PART 2 - REAL PROPERTY INTERESTS	
List the location of all real property in which you, your spouse, or your unemancipated children have equitable or legal interest either amounting to five thousand dollars (\$5,000) or more or comprising ten percent (10%) of your net worth or the net worth of your spouse or your unemancipated children. You need not include your residence unless it also serves as income property.	
Property and its location Greenbrier, 4 Copeland Hill, White Sulphur Springs, WV 24986	
Property and its location	
Property and its location	

If you have information to report below, select YES. If no information, select NO. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
PART 3 - NON-STATE EMPLOYERS	
List the name of your employer(s) and the employer(s) of your spouse and the nature of each employer's business.	
Your employer	Nature of business
Spouse's employer	Nature of business

If you have information to report below, select YES. If no information, select NO. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
PART 4 - SOLE PROPRIETORSHIP OR PROFESSIONAL PRACTICE	
List any sole proprietorship owned or professional practice operated by you or your spouse and the nature of the business.	
Name of your business	Nature of business
Name of spouse's business	Nature of spouse's business
Do any clients for these businesses listed above have a business relationship with your agency (or in the case of a candidate, with the office sought)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
List the name of any client or customer from whom you or your spouse received more than thirty-three percent (33%) of your (or your spouse's) non-state income in a year.	

If you have information to report below, select YES. If no information, select NO. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
PART 5 - PARTNERSHIPS	
List any partnership in which you or your spouse is a member and the nature of the partnership business.	
Name of partnership Daniels Associates, LLC	Nature of partnership investment
Name of spouse's partnership	Nature of spouse's partnership

If you have information to report below, select YES. If no information, select NO. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
PART 6 - OFFICER OR DIRECTOR OF CORPORATION	
List the name of any corporation in which you or your spouse is an officer or director and the nature of the corporation's business. Churches need not be listed.	
Name of corporation	Nature of business
Name of spouse's corporation	Nature of spouse's business

If you have information to report below, select YES. If no information, select NO. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
PART 7 - STOCKHOLDER OF CORPORATION			
List the name of any corporation in which you, your spouse, or your unemancipated children own stock or stock options having a fair market value in excess of ten thousand dollars (\$10,000). A time or demand deposit in a financial institution or insurance policy need not be listed.			
Name of corporation see attachment	Yours <input checked="" type="checkbox"/>	Spouse's <input type="checkbox"/>	Children's <input type="checkbox"/>
Name of corporation see attachment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Name of corporation all other assets held in blind Trust*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have information to report below, select YES. If no information, select NO. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
PART 8 - MOST RECENT EMPLOYER			
List the name and address of your most recent former employer.			
Name of your most recent former employer Executive Office of the President	Street address (number and street) White House		
	City Washington	State DC	ZIP code 20500

COMMENTS

Please place any comments in the fields below.

*Blind trust - Trust Administrator is The Trust Company of Oxford, Lora White, Trust Officer

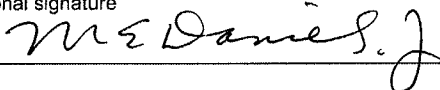
AFFIRMATION

I swear or affirm, under the penalty of perjury, that the facts as presented on this Financial Disclosure Statement are true, complete, and correct to the best of my knowledge and belief.

I understand that I may file an amended statement upon discovery of additional information required to be reported.

I acknowledge awareness of Indiana Code 4-2-6-8(d) under which a failure to file in a timely manner or filing a deficient statement is subject to a civil penalty at the rate of not more than **ten dollars (\$10) for each day the statement remains delinquent or deficient. The maximum penalty under this subsection is one thousand dollars (\$1,000).** I also acknowledge awareness of Indiana Code 4-2-6-8(e) under which a person who intentionally or knowingly files a false statement commits a class A infraction.

Personal signature



Date signed (month, day, year)

1/28/11

Mail or deliver to the following address:

Office of the Inspector General
315 West Ohio Street, Room 104
Indianapolis IN 46202-3210
Telephone: (317) 232-3850

INSTRUCTIONS

Each part must be answered. Incomplete statements will be returned. Please note that the statement must be affirmed and signed. Complete the form by printing legibly or typing. ***Bold italicized*** words in the form are defined below. Financial Disclosure Statements filed with the State Ethics Commission are available for public inspection, photocopying, and possible access on the agency Web site [www.ethics.in.gov].

WHO MUST FILE THIS FORM, AND WHEN

- 1) The Governor, Lieutenant Governor, Secretary of State, Auditor of State, Treasurer of State, Attorney General, and Superintendent of Public Instruction, any person who is the appointing authority of an agency, the director of each division of the Department of Administration, any purchasing agent within the Procurement Division of the Department of Administration, any agency employee, special state appointee, former agency employee, or former special state appointee with final purchasing authority or an employee required to do so by rule adopted by the inspector general must file this financial disclosure form no later than February 1 of every year.
- 2) Candidates for Governor, Lieutenant Governor, Secretary of State, Auditor of State, Treasurer of State, Attorney General, and Superintendent of Public Instruction must file this disclosure before filing a declaration of candidacy under IC 3-8-2, petition of nomination under IC 3-8-6, or declaration of intent to be a write-in candidate under IC 3-8-2-2.5, or before a certificate of nomination is filed under IC 3-8-7-8.
- 3) The persons listed in (1) above, must file not later than sixty (60) days after employment or taking office, unless the previous employment or office required the filing of a statement under this section.
- 4) The same persons required to file in (1) above must file not later than thirty (30) days after leaving employment or office, unless the subsequent employment or office requires the filing of a statement under this section.

DEFINITIONS OF TERMS USED IN THIS FORM

- 1) **"Business relationship"** includes the following:
 - (A) Dealings of a person with an agency seeking, obtaining, establishing, maintaining, or implementing:
 - (i) a pecuniary interest in a contract or purchase with the agency; or
 - (ii) a license or permit requiring the exercise of judgement or discretion by the agency.
 - (B) The relationship a lobbyist has with an agency.
 - (C) The relationship an unregistered lobbyist has with an agency.
- 2) **"Employer"** means any person from whom a state officer or employee or the officer's or employee's spouse received compensation (*a customer or client of a self-employed individual in a sole proprietorship or a professional practice is not considered to be an employer*).
- 3) **"Gift"** means the transfer or promise of a transfer of something of value regardless of the form without adequate and lawful consideration or consideration less than that required of others who are not state officers or employees, including the full or partial forgiveness of indebtedness, which is not extended to others who are not state employees on the same terms and conditions. However, "gift" does not include gifts from relatives of less than two hundred fifty dollars (\$250) or campaign contributions subject to IC 3-9-2.
- 4) **"Person"** means any individual, proprietorship, partnership, unincorporated association, trust, business trust, group, limited liability company, or corporation, whether or not operated for profit, or governmental agency or political subdivision.

Mr. Mitchell E. Daniels, Jr.
State Form 40876
(Stockholder of Corporation)

2010

Cash Equivalents

Owner

IU Credit Union
Bank of Indianapolis

Mitch
Mitch

Mutual Funds

JP Morgan Large Cap Growth Class A
JP Morgan Large Cap Value Class A
JP Morgan Market Expansion Index Class A

Cheri
Cheri
Cheri

Retirement Plans

Lilly 401(k)
 International Stock
 US Small Company
 Stable Income Fund
 US Large Company S&P 500 Index
TCO SEP/IRA Rollover
 Fidelity Institutional Mny Mrkt CI I (Trsy)
 Ishares Russell 1000 Growth Index
 Ishares Russell 2000 Index
 Fairholme Fund
 Matthews Asian Growth & Income
 Vanguard Inflation Protected Sec Adm
State of IN 457 Retirement Plan
 Black Rock Large Cap Value
 Fidelity Diversified International
 Vanguard Institutional Index
 IronBridge Frontegra SMID Fund
 Wells Fargo Advantage Capital Growth I
Public Employees Retirement Fund (PERF)
 Guaranteed Fund
Chase Rollover IRA
 Invesco Charter Class A
 Invesco Constellation Class A

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Chase Rollover IRA	
JP Morgan International Equity Fund Class A	Cheri
JP Morgan Large Cap Growth Class A	Cheri
JP Morgan Small Cap Growth Class A	Cheri
JP Morgan Large Cap Value Class A	Cheri
JP Morgan Market Expansion Index Class A	Cheri
TIAA CREF	
CREF Money Market	Cheri
TIAA Traditional	Cheri

Daniels Associates, LLC

Fidelity Institutional Mny Mrkt Cl I (Trsy)	Mitch
JP Morgan Alerian MLP Index	Mitch
Aston/River Small Cap Value I	Mitch
William Blair International Growth Fund Class I	Mitch
Brandes Institutional International Equity Fund	Mitch
Columbia Value and Restructuring Fund Class Z	Mitch
Credit Suisse Commodity Return	Mitch
Eaton Vance Global Macro Absolute Return Class I	Mitch
American Funds Growth Fund of America Class F2	Mitch
Leuthold Asset Allocation	Mitch
Matthews Asian Growth & Income	Mitch
PIMCO Emerging Local Bond Fund	Mitch
RS Emerging Markets Fund Class Y	Mitch
Royce Value Plus Investor	Mitch
Third Avenue Value Fund	Mitch
Vanguard Total Stock Market Index Fund Signal Shares	Mitch
Virtus Real Estate Securities Fund Class I	Mitch
Nuveen Asset Management	Mitch
Hatteras Non-Directional Hedge Fund	Mitch